	bal Lands Reporting Ection Form			60,0986/QMB(ControllNo 3060-0819
<010>	Study Area Code	269027		
<015>	Study Area Name	Virgin Mobile USA LP		
<020>	Program Year	2014		
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster	And the second of the second o	many and the second sec
<035>	Contact Telephone Number - Number of person identified in data line	<030> 913-762-6107		
<039>	Contact Email Address - Email Address of person identified in data line	e <030> andy.m.lancaster@sprint.com		
<910>	Tribal Land(s) on which ETC Serves			•
				11000
<920>	Tribal Government Engagement Obligation	Name of Attached Document (.	odf)	
	If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:			
		Select (Yes,No, NA)		
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;			
<922>	Feasibility and sustainability planning;	1		
<923>	Marketing services in a culturally sensitive manner;			
<924>	Compliance with Rights of way processes	1.4 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5		
<925>	Compliance with Land Use permitting requirements			
<926>	Compliance with Facilities Siting rules			And the second second
<927>	Compliance with Environmental Review processes			
<928>	Compliance with Cultural Preservation review processes			
<929>	Compliance with Tribal Business and Licensing requirements.	<del></del>		
	Compliance with Tribal Business and Licensing requirements.		and the second s	Billione i se se se su

A CONTRACTOR OF STREET, STREET	OTerrestrial:Backhaul:Reporting ection/Form			FCC/Förm 4 OMB/Göntt Jüly 2013	ol No., 3060-0986/	OMB(Control No.)	3060*0819
<010>	Study Area Code		269027			-	
<015>	Study Area Name		Virgin Mobile USA LP	The state of the s			
<020>	Program Year		2014				
<030>	Contact Name - Person USAC should contact regarding this data		Andrew M. Lancaster				
<035>	Contact Telephone Number - Number of person identified in data li	ne <030>	913-762-6107				
<039>	Contact Email Address - Email Address of person identified in data li	ne <030>	andy.m.lancaster@sprint.c	om			
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)						
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps supstream within the supported area pursuant to § 54.313(G)						

OF STATE OF	rms and Condition for Lifeline Customers			FGG/Form/481	Party of the second	11
Lifeline				OMB Control No 3	060-0986/OMB Control No. 3060-081	9
Data Coll	ection(Form)			July 2013	walling a second	
		:	269027			
<010>	Study Area Code		Virgin Mobile USA LP			
<015>	Study Area Name		2014		<del></del>	
<020>	Program Year	<u></u>	Andrew M. Lancaster	and the second of the second	<u> - Carante de la característica de la característi</u>	Carl Craws
<030>	Contact Name - Person USAC should contact regarding this data	no <0305	913-762-6107			
<035>	Contact Telephone Number - Number of person identified in data li					
<039>	Contact Email Address - Email Address of person identified in data I	ine <030>	andy m.lancaster@sprint.com			
				**************************************		
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans			A. See		
	A CONTRACTOR OF THE CONTRACTOR	Na Na	ame of attached document (.pdf)		· · · · · · · · · · · · · · · · · · ·	
	The state of the s			***		
<1220>	Link to Public Website	HTTPh	http://www.assurancewireless.com/P	ublic/TermsandCondition	s.aspx	
	Well and the state of the state					
	"Please check these boxes below to confirm that the attached PDF,					
	on line 1210, or the website listed, on line 1220,					
	contains the required information pursuant to §					
	54.422(a)(2) annual reporting for ETCs receiving low-income					
	support, carriers must annually report:					
<1221>	Information describing the terms and conditions of any voice	<b>7</b>				
- 4 40 40 45	telephony service plans offered to Lifeline subscribers,	<u>                                     </u>				
	and the state of t					
×17775	Date the control of t	· 🗸				
<1222>	Details on the number of minutes provided as part of the plan,					
<1223>	Additional charges for toll calls, and rates for each such plan.				gradient in the State of the St	

10/10/2013

Called Section			
(2000) Pr	ce Cap Carrier Additional Documentation		FCCForm 481
Data Coll	ection Form		OMB Control(No. 3060-0986/OMB Control No. 3060-0819
Includina	Rate-of=Return Carriers affiliated with Price Cap Local Exchange Carriers		July 2013.
All and an extension of			
		269027	
<010>	Study Area Code		
<015>		Virgin Mobile USA LP	
<020>		1014	
<030>		913-762-6107	
<035>	Contact Telephone Number - Number of person identified in data line <030>		
<039>	Contact Email Address - Email Address of person identified in data line <030	andy.m.tanedsterwsprine.com	
		Company of the compan	
	e boxes below to note compliance as a recipient of incremental Connect Am		
0.120,110		(e) the information reported on this form and in the documents attached	
		~~	
	Incremental Connect America Phase I reporting		
<2010>	2nd Year Certification (47 CFR § 54.313(b)(1))		
<2010>	3rd Year Certification (47 CFR § 54.313(b)(2))		
\ZU11>	314 Tear Certification (47 cirk § 34.325(b)(2))		<u></u>
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a)	<b>\</b>	
<2012>	2013 Frozen Support Certification	•	
<2012>	2014 Frozen Support Certification		
<2013>	2015 Frozen Support Certification		
<2015>	2016 and future Frozen Support Certification		
12015	2010 and later en over support solutions.	·	
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))		
<2016>	Certification Support Used to Build Broadband		
			A second
	Connect America Phase II Reporting (47 CFR § 54.313(e))		
<2017>	3rd year Broadband Service Certification		
<2018>	5th year Broadband Service Certification		
<2019>	Interim Progress Certification		
<2020>	Please check the box to confirm that the attached PDF, on line 2021		
	contains the required information pursuant to § 54.313 (e)(3)(ii), as		
	of CAF Phase II support shall provide the number, names, and addre	· ·	
	community anchor institutions to which began providing access to b		
	service in the preceding calendar year.		
<2021>	Interim Progress Community Anchor Institutions	Name of Attached Document Listing Required Information	
	and the control of t The control of the control of		

CONTRACTOR OF	ite Of Return Carrier Additional Documentation		FCC Form 481	060-0986/OMB Control No.	3060-0819
		and the second s	- July 2013		
	269027				
<010>	Study Area Code	obile USA LP		· · · · · · · · · · · · · · · · · · ·	<del></del>
<015> <020>	Study Area Name Virgin M Program Year 2014	ODITE OSA DE		7	
<030>		drew M. Lancaster		<del></del>	<del></del>
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107			
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com			
	he boxes below to note compliance on its five year service quality plan (pursu CFR § 54.313(f)(2). I further certify that		g compliance with the finar		
	Progress Report on 5 Year Plan				
(3010)	Milestone Certification (47 CFR § 54.313(f)(1)(i))	Name of Attached Document Listing Required Information			
(3010)	Please check this box to confirm that the attached PDF, on line 3012,	Name of Attached Document Listing Required information	[		<del>- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1</del>
(3011)	contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.				
(3012) (3013) (3014)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:  Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	Name of Attached Document Listing Required Information	(Yes/No) · (Yes/No)		
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows				
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation If the response is no on line 3014, Is your company audited?	Name of Attached Document Listing Required Information	(Yes/No)		- 14 
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains			it.	
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications PDF of Balance Sheet, Income Statement and Statement of Cash Flows				
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.		11.4		
(3022)	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:  Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,  Underlying information subjected to a review by an independent certified public accountant				
(3024)	Underlying information subjected to an officer certification.	•			
(3024)					
	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		<b></b>		
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information			<u> -                                   </u>
					<del>-</del>

	tion - Reporting Carr lection Form	rier FCCF67m 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	269027
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Pers	on USAC should contact regarding this data Andrew M. Lancaster
<035>	Contact Telephone I	Number - Number of person identified in data line <030> 913 - 762 - 6107
<039>	Contact Email Addre	ss - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com

# TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certify that I am an officer of the reporting carrier; my responsibilities inc recipients; and, to the best of my knowledge, the information reported on		for universa	al service support
Name of Reporting Carrier: Virgin Mobile USA LP			
Signature of Authorized Officer: CERTIFIED ONLINE		Date	10/10/2013
Printed name of Authorized Officer: Jay Franklin			
Fitle or position of Authorized Officer: Assistant Controller			
Felephone number of Authorized Officer: 913 762-6107	8		8.7
Study Area Code of Reporting Carrier: 269027	Filing Due Date for this form: 10/15/2013		

	tion - Agent / Carrier	FCC Form 4813
Data Col	ection Form	OMB Control No 3060-0986/OMB Control No 3060-0819
<010>	Study Area Code	269027
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person L	SAC should contact regarding this data Andrew M. Lancaster
<035>	Contact Telephone Numb	per - Number of person identified in data line <030> 913 - 762 - 6107
<039>	Contact Email Address - E	mail Address of person identified in data line <030> andy.m.lancaster@sprint.com

# TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

is authorized to submit the information reported on behalf of the reporting carrier is ocertify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized gent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.						
Name of Authorized Agent:	·					
Name of Reporting Carrier:						
Signature of Authorized Officer:		Date:				
Printed name of Authorized Officer:						
Title or position of Authorized Officer:						
Telephone number of Authorized Officer:	and the state of t					
Study Area Code of Reporting Carrier:	Filing Due Date for this form:					

# TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent A	uthorized to File Annual Reports for CAF or LI Recip	ients on Behalf of Reporting Carrier
	rized to submit the annual reports for universal service suppo porting carrier; and, to the best of my knowledge, the inform:	ort recipients on behalf of the reporting carrier; I have provided ation reported herein is accurate.
Name of Reporting Carrier:		, , , , , , , , , , , , , , , , , , ,
Name of Authorized Agent or Employee of Agent:		
Signature of Authorized Agent or Employee of Agent:		Date:
Printed name of Authorized Agent or Employee of Agent:		
Title or position of Authorized Agent or Employee of Agent		
Telephone number of Authorized Agent or Employee of Ager	nt:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

(800) Operating Companies  Data Collection Form		FOC Fermi 48A OMB Control No. 3050:0986/ July 2013	@MB Control No. 3060-0819
<010> Study Area Code	269027		
<015> Study Area Name	Virgin Mobile USA LP		
<020> Program Year	2014	, All and the second se	and the second second
<030> Contact Name Person USAC should contact regarding this data	Andrew M. Lancaster	A Company of the Comp	and the second consider a second of the
<035> Contact Telephone Number - Number of person identified in data lin	e <030> 913-762-6107		
<039> Contact Email Address, Email Address of person identified in data lin	ne <030> andy.m.Tancaster@sprint com		
<810> Reporting Carrier Virgin Mobile USA LP		and the state of t	
<811> Holding Company Sprint Corporation			

<812> Operating Company

3> <a></a>	<a2></a2>	<a35€< th=""></a35€<>
Affiliates	SAC	Doing Business As Company or Brand Designation
Virgin Mobile USA LP	269027	Assurance Wireless
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70000 2000 E000	m 481 - Carrier Annual Reporting illection Form	OMB C	rm 481 ontrol No. 3060-0385/OMB Control No. 3060 11	-0819
<010>	Study Area Code	279034		- 
<015>	Study Area Name	Virgin Mobile USA LP		. 1967 4 (j)
<020>	Program Year	2014		e e e e e e e e e e e e e e e e e e e
<030>	Contact Name: Person USAC should contact with questions about this data	Andrew M. Lancaster		
<035>	Contact Telephone Number: Number of the person identified in data line <030:	913-762-6107		4.4
<039>	Contact Email Address: Email of the person identified in data line <030>	andy.m.lancaster@sprint.com		
ANNUA	LIREPORTING FOR ALL CARRIERS		59:13 50: Completion Com- Required Req	letion uired
<100>	Service Quality Improvement Reporting	(complete attached worksheet)	10, 70, 70,	
<200> <210>	Outage Reporting (voice) < check box if	(complete attached worksheet) no outages to report		<b>/</b>
<310>	Unfulfilled Service Requests (voice)  Detail on Attempts (voice)  Unfulfilled Service Requests (broadband)  Detail on Attempts (broadband)	(attach descriptive document)		
<400> <410> <420>	Number of Complaints per 1,000 customers (voice Fixed Mobile 0.0886  Number of Complaints per 1,000 customers (broad Fixed Mobile			
<900> <1000> <1010> <1100> <1110>	2790341a510 Functionality in Emergency Situations 2790341a610	Rules Compliance (check to indicate certification) (attached descriptive document) (check to indicate certification) (attached descriptive document) (complete attached worksheet) (complete attached worksheet) (if yes, complete attached worksheet) (check to indicate certification) (attach descriptive document) (if not, check to indicate certification) (complete attached worksheet) (complete attached worksheet)		
<2000>	Price Cap Carriers, Proceed to <u>Price Cap Additional</u> Including Rate-of-Return Carriers affiliated with Pr	The state of the s		
<2005>		(complete attached worksheet)		
<3000>	Rate of Return Carriers, Proceed to ROR Additiona	al Documentation Worksheet (check to indicate certification)		
<3005>		(complete attached worksheet)		

* C	rvice Quality Improvement Reporting Illection Form		FCC Form 481 OMB Control No: 3060-0986/6 July/2013	DMB Control No. 3060-0819
	279034			
<010>	Study Area Code	TION I D		
<015>	Study Area Name Virgin Mobile Program Year 2014	USA LP		<u> </u>
<020> <030>	nosi ampeai	M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line <030> 913-7			
<039>	Contact Email Address - Email Address of person identified in data line <030> andy			
(0332	Contact Effair Address - Effair Address of person definition in data life 3000			
<110>	Has your company received its ETC certification from the FCC?	(yes / no ) O		· 编集
	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5	0 0		
<111>	year plan" filed with the FCC?	(yes / no ) O	8°-	
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your comp CETC which only receives frozen support, your progress report is only required to address voice telephony service.	nany is a		
		Name of Atta	ched Document (.pdf)	The same state of the same sta
	Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.			
<113>	Maps detailing progress towards meeting plan targets			
<114>	Report how much universal service (USF) support was received			
<115>	How (USF) was used to improve service quality			
<116>	How (USF)was used to improve service coverage			
<117>	How (USF) was used to improve service capacity			
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.			
		100		

(200) Service Outage Reporting (Voice)
- FCC Form 481

Data Collection Form
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013.

<220>

<010>	Study Area Code	279034					
<015>	Study Area Name	Virgin Mobile USA LP					
<020>	Program Year	2014					
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster					
<035>	5> Contact Telephone Number - Number of person identified in data line <030> 913-762-6107						
<039>	> Contact Email Address - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com						

<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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									N		
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Dáta Col	e Offerings including Voice Rate Data ection Form			986/OMB/control(No.; 3060-0819)
<010>	Study Area Code	279034		
<015>	Study Area Name	Virgin Mobile USA LP	No. 1 Control of the	
<020>	Program Year	2014		
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107		
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com		
			.*.	
<701>	Residential Local Service Charge Effective Date 1/1/2013			
<702>	Single State-wide Residential Local Service Charge			

	tate	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	₹63> State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and F
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			<u> </u>		See att	ached worksheet	1		-
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(710) Broadband Price Offerings		The second secon	FIGURE STATE OF THE STATE OF TH	
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<010>	Study Area Code	279034
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <0	30> 913-762-6107
<039>	Contact Email Address - Email Address of person identified in data line <0	30> andy.m.lancaster@sprint.com

<711>

<a1> ***</a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <c>,</c></c>	<d1></d1>	** <d2>*</d2>	<d3>,</d3>	
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached ( <i>select</i>
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				č.				
			11 1/2 1/2 24				<del>``````</del>	
<u> </u>	<u> </u>		<u>e attached</u>	<u></u>				<u> </u>
		work	sheet	<u> </u>				
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<u> </u>							Contract to the contract of the	
of all Months of the second se		-1.2						

(800) Operating Companies	FGC Form 481
Data Collection Form	OMB control No. 3060-0986/OMB Control No. 3060-0819
	July2013 Chest 1

<010>	Study Area Code	279034		
<015>	Study Area Name	Virgin Mobile USA LP		
<020>	Program Year	2014	the state of the s	······································
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line <0	30> 913-762-6107		
<039>	Contact Email Address - Email Address of person identified in data line <	030> andy.m.lancaster@sprint.com	· · · · · · · · · · · · · · · · · · ·	
<810>	Reporting Carrier Virgin Mobile USA LP			· · · · · · · · · · · · · · · · · · ·
<811>	Holding Company Sprint Corporation			· · · · · · · · · · · · · · · · · · ·
<812>	Operating Company			<u> </u>

Affiliates	property of	SAC	Doing Business As Company or Brand Designation
		<u>-</u>	
	<del> See a</del>	ttached works	heet
			The state of the s
	<del></del>	*	

(900)§Tril	oal Lands Reporting	FCC/Form/481
A THE RESERVE AND ADDRESS OF	ection Form-	OMB Control No. 3060-0986/OMB Control No. 3060-0819
		Jüly2013
	· · · · · · · · · · · · · · · · · · ·	
<010>	Study Area Code	279034
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line	
<039>	Contact Email Address - Email Address of person identified in data lin	Ne <030> andy.m.lancaster@sprint.com
<910>	Tribal Land(s) on which ETC Serves	
(310>	Tribal Editu(5) of Which ETC Serves	
<920>	Tribal Government Engagement Obligation	
		Name of Attached Document (.pdf)
	If your company serves Tribal lands, please select (Yes,No, NA) for	
	each these boxes to confirm the status described on the attached	
	PDF, on line 920, demonstrates coordination with the Tribal	
	government pursuant to § 54.313(a)(9) includes:	
		Select
		(Yes,No,
		NA)
<921>	Needs assessment and deployment planning with a focus on Tribal	
17217	community anchor institutions;	
<922>	Feasibility and sustainability planning;	
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<925>	Compliance with Facilities Siting rules	
<926>	A Sept. Control of the Control of th	
	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

A STATE OF THE PARTY OF THE PAR	DiTerrestrial Backhaul Reporting ection(Form)	FCC Form 481 OMB Control Not: 306010986/OMB Control Not: 306010819 July 2013
<010>	Study-Area-Gode	279034
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

(1200) Te	rms and Condition for Elfeline Customers		All the second s	FCC Form 480		
Lifeline.			4 di -	OMB <sup>(</sup> Control	No.: 3060-0986/OMB.C	ontrol:No: 3060-0819
Data Coll	ection Form		and the second of the second o	July 2013		
<010>	Study Area Code		279034		······································	
<015>	Study Area Name		Virgin Mobile USA LP			
<020>	Program Year		2014	. A see A see A	And the second second	<u> </u>
<030>	Contact Name - Person USAC should contact regarding this data	<u> </u>	Andrew M. Lancaster			
<035>	Contact Telephone Number - Number of person identified in data li		913-762-6107			
<039>	Contact Email Address - Email Address of person identified in data I	ine <030>	andy.m.lancaster@sprint.com	1,42%		· · · · · · · · · · · · · · · · · · ·
	e de la Companya de La companya de la Com					
					White #	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans				reduce I	•
<b>\1210&gt;</b>	Terms & Conditions of Voice receptiony chemic rians	Na	ame of attached document (.pdf)		A.	· · · · · · · · · · · · · · · · · · ·
<1220>	Link to Public Website	HTTPh	attp://www.assurancewireless.com/Pub	lic/TermsandCon	ditions.aspx	
	"Please check these boxes below to confirm that the attached PDF,					
	on line 1210, or the website listed, on line 1220,					
	contains the required information pursuant to §					
	54.422(a)(2) annual reporting for ETCs receiving low-income				And the second	
	support, carriers must annually report:					
<1221>	Information describing the terms and conditions of any voice	<b>V</b>				
	telephony service plans offered to Lifeline subscribers,	للنسسايا			. 1 	
					Trees.	
<1222>	Details on the number of minutes provided as part of the plan,	1				
	betains on the number of minutes provided as part of the plant,					
	A CONTRACTOR STORY OF THE STORY					
<1223>	Additional charges for toll calls, and rates for each such plan.				and the state of t	and the second

10/10/2013

Study Area Code   279034	
Coltact Name - Person USAC should contact regarding this data   Number of person identified in data line <030>   Program Pear   Person USAC should contact regarding this data   Number of person identified in data line <030>   Program Pear   Person USAC should contact regarding this data   Number of person identified in data line <030>   Program Pear   Person USAC should contact regarding this data   Number of person identified in data line <030>   Program Pear   Person USAC should contact regarding this data   Person USAC	
Coltact Name - Person USAC should contact regarding this data   Number of person identified in data line <030>   Program Pear   Person USAC should contact regarding this data   Number of person identified in data line <030>   Program Pear   Person USAC should contact regarding this data   Number of person identified in data line <030>   Program Pear   Person USAC should contact regarding this data   Number of person identified in data line <030>   Program Pear   Person USAC should contact regarding this data   Person USAC	
<020> Program Year <030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030> <035> Contact Email Address - Email Address of person identified in data line <030> andy m. lancaster@sprint.com	
<030> Contact Name - Person USAC should contact regarding this data Andrew M. Lancaster <035> Contact Telephone Number - Number of person identified in data line <030> 913-762-6107 <039> Contact Email Address - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com	
<035> Contact Telephone Number - Number of person identified in data line <030> 913-762-6107  <039> Contact Email Address - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com	
<039> Contact Email Address - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com	
$\epsilon$	:
	1
	*
CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II	
support as set forth in 47 CFR § 54.313(b),(c),(d),(e) the information reported on this form and in the documents attached below is accurate.	
Incremental Connect America Phase I reporting  <2010> 2nd Year Certification (47 CFR § 54.313(b)(1))	
<2010> 2nd Year Certification (47 Crk y 54.313(b)(1)) <2011> 3rd Year Certification (47 Crk y 54.313(b)(2))	
30112 Site Tear Certification (47/Crk & 34/3.515(a)(2))	
Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))	
<2012> 2013 Frazen Support Certification	
<2013> 2014 Frozen Support Certification	
<2014> 2015 Frozen Support Certification	
<2015> 2016 and future Frozen Support Certification	
Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))	
<2016> Certification Support Used to Build Broadband	
Connect America Phase II Reporting {47 CFR § 54.313(e}}	
<2017> 3rd year Broadband Service Certification	
<2018> 5th year Broadband Service Certification	
<2019> Interim Progress Certification	
<2020> Please check the box to confirm that the attached PDF , on line 2021,	
contains the required information pursuant to § 54.313 (e)(3){ii), as a recipient	,
of CAF Phase II support shall provide the number, names, and addresses of	
community anchor institutions to which began providing access to broadband	
service in the preceding calendar year.	
<2021> Interim Progress Community Anchor Institutions Name of Attached Document Listing Required Information	
	•

				<u> </u>	alana arang ar	Administration		
รถกกไข้.	ite Of/Return Carrier Additional Documentation		200 - 175 d	FCC Form 481	1.00	41.5	12.513	
Journ Re	ILE OF RETAIN CATTER AUGUSTONIA POCUMENTATION		\$ 3 <b>5</b> 00.	the state of the s	10 m			
Data Coll	ection(Form)	-1.	- 1	OMB Control No. 130	060-0986/OMB Cont	rol No. 3	060-081	9-
		and the second second	Alexander	Júlý 2013 -				
R. C.				And the control of the desire of the second		Control of Control of Control	ALTERNATION AND PROPERTY.	ASSESSED BY
	279034							
<010>	Study Area Code	111 1102 11	·	· · · · · · · · · · · · · · · · · · ·				
<015>	Study Area Name Virgin Mc Program Year 2014	bile USA LP				<del></del>		
<020>	Tropical to a	rew M. Lancaster	<del>-i</del>		<del></del>	<del>-</del>		
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107	<del></del>			<del></del>		
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com	<del>- 6 </del>					
1752 <b>5</b> 7798785795		Kakada ar barak bahar kambalan kara rasa salah abas salah alam da kara salah ar salah salah salah salah salah	Dalien errei start (Sisterano)	Terrandor-coloria controloria medicario	nesi Gress Associati dell'Allandiano	Paramente de Propinsi	Maria Maria	ARPRIKALII
CHECK t	he boxes below to note compliance on its five year service quality plan (pursua	nt to 47 CFR § 54.202(a)) and, for privately held car	riers, ensuring c	ompliance with the final	ncial reporting requir	ements s	et forth is	n 47
		he information reported on this form and in the do						
							. 7	
	Progress Report on 5 Year Plan							
(3010)	Milestone Certification (47 CFR § 54.313(f)(1)(i))	Name of Attached Document Listing Required Inf	ormation		*1	5 9		
·	Please check this box to confirm that the attached PDF, on line 3012,					1	_	
				II				
(3011)	contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and				-			
(3011)	addresses of community anchor institutions to which began providing							
	access to broadband service in the preceding calendar year.							
	,							
(3012)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	Name of Attached Document Listing Required Inf	ormation					
(3013)	is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))		1A	(Yes/No)	14.74.7		. 0	
(3014)	If yes, does your company file the RUS annual report		100	(Yes/No)				
	Please check these boxes to confirm that the attached PDF, on line 3017,							
	contains the required information pursuant to § 54.313(f)(2) compliance							
	requires:			·				
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)							
	releconstitutications borrowers;							
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows			للــــا				
	If the response is yes on line 3014, attach your company's RUS annual							
(3017)	report and all required documentation	Name of Attached Document Listing Required Inf	ormation				<	
(3018)	If the response is no on line 3014, is your company audited?	<u> </u>		(Yes/No)				
	If the response is yes on line 3018, please check the boxes below to					2		
	confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains							
	,							
(3019)	Either a copy of their audited financial statement; or (2) a financial report							
(3013)	in a format comparable to RUS Operating Report for Telecommunications							
(3020)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows							. 17
		•					1 (W)	
(3021)	Management letter issued by the independent certified public accountant			f.,		6 4	in the same	
	that performed the company's financial audit:							
	If the response is no on line 3018; please check the boxes below						4	
	to confirm your submission, on line 3026 pursuant to § 54.313(f)(2),						2	
	contains:							
	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a			· [] ,		2		
(3022)	format comparable to RUS Operating Report for Telecommunications							
	Borrowers,							
(2022)	Underlying information subjected to a review by an independent certified							
(3023)	public accountant						3	
(3024)	Underlying information subjected to an officer certification.			, <u></u>			***	
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows							
					4 12 4	4		
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Inf	ormation			9	30	
			4	91		1		

<010>	Study Area Code	279034	 
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2014	
<030>	Contact Name - Pers	on USAC should contact regarding this data Andrew M. Lancaster	
<035>	Contact Telephone	Number - Number of person identified in data line <030> 913 -762 -6107	
<039>	Contact Email Addre	ss - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com	 E. Day
-			 1. Griden e di \$1. 1.2 s. 1

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

### Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: Virgin Mobile USA LP

ignature of Authorized Officer: CERTIFIED ONLINE

Date 10/10/2013

Printed name of Authorized Officer: Jay Franklin

Title or position of Authorized Officer: Assistant Controller

Telephone number of Authorized Officer: 913 762-6107

Study Area Code of Reporting Carrier:

79034

Eiling Due Date for this form. 10/15/201

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

1,500,000,000,000	tion = Agent / Carrier ection Form	FCGForm 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 A
A Section		July 2013
<010>	Study Area Code	279034
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person U	SAC should contact regarding this data Andrew M. Lancaster
<035>	Contact Telephone Numb	er - Number of person identified in data line <030> 913-762-6107
<039>	Contact Email Address - E	mail Address of person identified in data line <pre>c030&gt;</pre> andy.m.lancaster@sprint.com

# TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) also certify that I am an officer of the reporting carrier; m agent; and, to the best of my knowledge, the reports and	y responsibilities include ensuring the accuracy of the annual	e information reported on behalf of the reporting carrier. I data reporting requirements provided to the authorized
Name of Authorized Agent:		
Name of Reporting Carrier:		
Signature of Authorized Officer:		Date:
Printed name of Authorized Officer.		
Title or position of Authorized Officer:	AFFERDAMENT	
Telephone number of Authorized Officer:	Books <u>States word</u> in the st	·
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

# TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent A	Authorized to File Annual Reports for CAF or LI Recipier	its on benan of Reporting Carrier
	orized to submit the annual reports for universal service support r reporting carrier; and, to the best of my knowledge, the informatio	
Name of Reporting Carrier:		
Name of Authorized Agent or Employee of Agent:		
ignature of Authorized Agent or Employee of Agent:		Date:
rinted name of Authorized Agent or Employee of Agent:		
itle or position of Authorized Agent or Employee of Agent		
elephone number of Authorized Agent or Employee of Ag	ent:	
itudy Area Code of Reporting Carrier:	Filing Due Date for this form:	

# Attachments

Contact Email Address - Email Address of person identified in data line <030> <039> Virgin Mobile USA LP <810> Reporting Carrier Sprint Corporation <811> Holding Company

andy.m.lancaster@sprint.com

913-762-6107

Contact Telephone Number - Number of person identified in data line <030>

<035>

<812>

**Operating Company** 

<a1></a1>	<a2></a2>	<b>&lt;</b> 3>>±
Affiliates	SAC	Doing Business As Company or Brand Designation
Virgin Mobile USA LP	279034	Assurance Wireless
and the second s		

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<b>心理学学院</b>	m,481 - Carrier Annual Reporting Dilection Form	FCCForm 431  OMB Control No. 3060-0986/OMB Control No. 3060-081  July 2013	19
<010>	Study Area Code	289028	71 <u>1. Mar 1</u>
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2014	<u> </u>
<030>	Contact Name: Person USAC should contact with questions about this data	Andrew M. Lancaster	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	913-762-6107 D>	
<039>	Contact Email Address: Email of the person identified in data line <030>	andy.m.lancaster@sprint.com	
AÑNUA	LEREPORTING FOR ALL CARRIERS	50.318 S1.02 Completion Required Require	tion red
<100>	Service Quality Improvement Reporting	(check box when complete (complete attached worksheet)	
<200> <210>	Outage Reporting (voice)	(complete attached worksheet)  f no outages to report	
<300> <310> <320> <330>	Unfulfilled Service Requests (voice)  Detail on Attempts (voice)  Unfulfilled Service Requests (broadband)  Detail on Attempts (broadband)	{attach descriptive document}	
<400> <410> <420> <430> <440> <450>	Number of Complaints per 1,000 customers (voice Fixed Mobile  Number of Complaints per 1,000 customers (broad Fixed Mobile		
<800> <900> <1000> <1010> <1100> <1110>	Service Quality Standards & Consumer Protection (289028ms510) Functionality in Emergency Situations [289028ms610] Company Price Offerings (voice) Company Price Offerings (broadband) Operating Companies and Affiliates Tribal Land Offerings (Y/N)? Voice Services Rate Comparability  Terrestrial Backhaul (Y/N)?  Terms and Condition for Lifeline Customers	Rules Compliance  (check to indicate certification)  (attached descriptive document)  (check to indicate certification)  (attached descriptive document)  (complete attached worksheet)  (complete attached worksheet)  (complete attached worksheet)  (if yes, complete attached worksheet)  (check to indicate certification)  (attach descriptive document)  (if not, check to indicate certification)  (complete attached worksheet)  (complete attached worksheet)	
<2000> <2005> <3000> <3005>	Price Cap Carriers, Proceed to <u>Price Cap Additional</u> Including Rate-of-Return Carriers affiliated with Price Rate of Return Carriers, Proceed to <u>ROR Additional</u>	Price Cap Local Exchange Carriers  (check to indicate certification)  (complete attached worksheet)	

10 The Control of the	ervice Quality Improvement Reporting illection Form			FCC Form 481 OMB Control No. July 2013	3060°0986/OMB(Cor	itrol No. 3060 081	9*
<010>	Study Area Code 289028						* * * * * * * * * * * * * * * * * * *
<015>	Study Area Name Virgin Mobile USA	A LP	\$ A				1.5.3
<020>	Program Year 2014		4 .	4 - Carry 15	.:		
<030>	Contact Name - Person USAC should contact regarding this data  Andrew M.	Lancaster			:		\$400.5
<035>	Contact Telephone Number - Number of person identified in data line <030> 913-762-	6107		All a			
<039>	Contact Email Address - Email Address of person identified in data line <030> andy m.	lancaster@sprint.o	com				
<110>	Has your company received its ETC certification from the FCC?  If your answer to Line <110> is yes, do you have an existing §54.202(a) "5	(yes / no )	0			- Company of the Comp	\$ 14 mg
<111>	year plan" filed with the FCC?	(yes / no )	$\circ$				
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company CETC which only receives frozen support, your progress report is only required to address voice telephony service.		e of Attachec	d Document (.pdf)			
	Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	·					
<113>	Maps detailing progress towards meeting plan targets			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
<114>	Report how much universal service (USF) support was received				1		
<115>	How (USF) was used to improve service quality						
<116>	How (USF)was used to improve service coverage						
<117>	How (USF) was used to improve service capacity						
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.					# 1	
					Maria San Lin	. Aut	1965